24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

NAME OF COMMITTEE (In Full)
ARIZONA GRASSROOTS ACTION PAC

FEC IDENTIFICATION NUMBER ▼

C | C00558445

Check if ☐ 24-hour report   ☒ 48-hour report   ☒ New report   ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Connect Strategic Communications LLC

Mailing Address PO Box 141251

City	State	Zip Code
Dallas	TX	75214

Purpose of Expenditure
IE-McCain-Online Ads

Category/Type 004

Name of Federal Candidate
JOHN S MCCAIN

☒ Support
☐ Oppose

Date of Public Distribution/Dissemination
M M 09 / D D 28 / Y Y Y Y 2016

Amount
20000.00

Transaction ID : SE.5444
Date of Disbursement or Obligation
M M 09 / D D 28 / Y Y Y Y 2016

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AZ

Calendar Year-To-Date
Per Election for Office Sought   855025.00

Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶ _____

Full Name of Payee
Connect Strategic Communications LLC

Mailing Address   PO Box 141251

City	State	Zip Code
Dallas	TX	75214

Purpose of Expenditure
IE-Kirkpatrick-Online Ads

Category/Type 004

Name of Federal Candidate
ANN LEILA KIRKPATRICK

☐ Support
☒ Oppose

Date of Public Distribution/Dissemination
M M 09 / D D 28 / Y Y Y Y 2016

Amount
20000.00

Transaction ID : SE.5445
Date of Disbursement or Obligation
M M 09 / D D 28 / Y Y Y Y 2016

Office Sought: ☐ House District: 00
☐ President ☒ Senate State: AZ

Calendar Year-To-Date
Per Election for Office Sought   875025.00

Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures .... ▶ 40000.00

(b) SUBTOTAL of Unitemized Independent Expenditures .... ▶

(c) TOTAL Independent Expenditures .... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Lisa Lisker
[Electronically Filed]

Signature

Date M M 09 / D D 29 / Y Y Y Y 2016